## PEDIATRIC CLINICIAN UPDATE

# Preventing Alcohol and Other Drug Use by Pre-Teens

In Massachusetts, 1 of 4 seventh graders reported drinking alcohol in the last month.\* Pediatric clinicians can help prevent early use of alcohol, tobacco, and other drugs (ATOD) by supporting anti-drug messages from families and schools. Through health guidance and appropriate intervention, pediatric clinicians can help pre-teens lead drug-free lives.

\*MA Youth Alcohol Prevention Task Force. Underage Drinking in MA. May 2002

## Beginning the Conversation

#### Ask ALL pre-teens\*, regardless of their risk level, annually about ATOD:

- ▲ Interview older pre-teens privately and explain confidentiality policies to patients/families.
- ▲ Explain that you ask all your pre-teen patients the same questions.
- ▲ Start with open-ended, less personal questions and progress to more difficult questions (e.g., HEADSS—Home, Education, Activities, Drugs, Sex, Suicide/Emotional Health).
- ▲ Consider age and risk factors (e.g., family history of ATOD problems, school difficulties, behavioral/mental health issues, abuse) when shaping the discussion.
- ▲ Use a transitional approach when inquiring about ATOD. First, ask pre-teens about attitudes toward and knowledge about ATOD, friends' use, and peer pressure to experiment. Then ask about actual use and history of riding in a vehicle with a driver under the influence.
- A Remain nonjudgmental, and acknowledge patients' thoughts and feelings.

\*Generally refers to 9-12 year olds (though much information in this Update can apply to a wider age group)

#### Health Guidance for Pre-Teens

# Praise abstainers for their healthy choices, and provide health guidance:

- ▲ Emphasize that ATOD use is bad for their health, focusing on short-term risks.
- ▲ Analyze with pre-teens ways they can avoid situations where ATOD are readily available.
- ▲ Discuss ways to resist peer pressure to use (e.g., suggest another activity, change the subject).
- ▲ Encourage friendships with other abstainers and participation in substance-free activities.
- ▲ Offer free educational materials (see back).
- ▲ Emphasize your willingness to always be available to confidentially discuss ATOD.
- ▲ Reinforce messages within the office environment (e.g., antismoking posters).

### Health Guidance for Parents/Guardians

### **Encourage parents/guardians to:**

- ▲ Reward healthy choices and activities.
- ▲ Set and always enforce clear rules about ATOD.
- ▲ Engage in regular family activities (e.g., eating meals together, family meetings).
- ▲ Discuss substance abuse frequently and emphasize that experimentation is not okay.
- ▲ Help their children develop resistance skills.
- ▲ Emphasize and provide safe, sober transportation.
- ▲ Examine their own ATOD use, and model healthy behaviors (e.g., never drive after drinking; never use drugs).
- ▲ Seek help, if needed, with their own ATOD abuse.

# Preventing Alcohol and Other Drug Use by Pre-Teens

## Screenings and Brief Interventions

If you suspect use—based on responses to initial questions and other signs (e.g., negative changes in school performance, group of friends, personality, or appearance; depressive symptoms)—conduct a screening and brief intervention. If you are unfamiliar with intervention strategies, conduct the screening and refer those who screen positive to a behavioral health specialist for further assessment.

### Screening

Consider using the CRAFFT\* tool with adolescents aged 12 and older.

During the past year, have you:

- **C:** ridden in a CAR driven by someone (including yourself) who was "high" or had been using alcohol or drugs?
- **R:** used alcohol or drugs to RELAX, feel better about yourself, or fit in?
- **A:** used alcohol or drugs while you are by yourself, ALONE?
- **F:** FORGOTTEN things you did while using alcohol or drugs?
- **F:** had your family or FRIENDS tell you that you should cut down on your drinking or drug use?
- **T:** gotten into TROUBLE while you were using alcohol or drugs?

Two or more "yes" responses suggest an alcohol- or drug-related disorder and warrant further assessment.

## Brief Interventions/Referrals

Six principles of effective brief interventions\*:

- **F:** FEEDBACK on personal risk (e.g., "You said your grades have dropped.")
- **R:** emphasis on own RESPONSIBILITY for change (e.g., "I'll help but it's up to you to ...")
- A: clear ADVICE to change (e.g., "I think you should...")
- **M**: a MENU of options (e.g., stop use, treatment)
- **E:** EMPATHETIC counseling style (e.g., "I'm worried about you.")
- **S:** facilitation of patient's SELF-EFFICACY to change (e.g., "I know you can do it.")

Refer patients to an ATOD treatment expert (see resources below) if they use regularly/cannot maintain abstinence; have a co-occurring mental health disorder or suffered from abuse; engage in other risky behaviors; or have placed their or others' health at risk.

For more information, see www.brightfutures.org/mentalhealth/pdf/professionals/bridges/stages\_substance.pdf.

#### **REFERRAL/TREATMENT RESOURCES:**

- ▲ MA Substance Abuse Information & Education Helpline (800-327-5050; multilingual), www.helpline-online.com
- ▲ Center for Adolescent Substance Abuse Program, Children's Hospital, 617-355-5433, www.ceasar-boston.org
- ▲ MA Substance Abuse Prevention & Treatment Directory, MA Dept. of Public Health, www.state.ma.us/dph/bsas/pubs.htm

#### FREE EDUCATIONAL RESOURCES:

- ▲ Freevibe, www.freevibe.com (for pre-teens)
- ▲ The Cool Spot, www.thecoolspot.org (for pre-teens)
- ▲ Be the First to Talk with Your Pre-Teen about ATOD and Choose to Keep Your Freedom, www.state.ma.us/dph/bsas/pubs.htm
- ▲ National Clearinghouse for Alcohol & Drug Information, 800-729-6686 (English/Spanish), www.health.org/features/family
- ▲ Parents. The Anti-Drug, www.theantidrug.com (multilingual)
- ▲ Family Matters, www.sph.unc.edu/familymatters/Program\_materials.htm

<sup>\*</sup>Copyright 2002, Children's Hospital Boston

<sup>\*</sup>W. Miller and V. Sanchez, 1994